STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
DIVISION OF ENTERPRISE TECHNOLOGY
DOA-10111 (R09/2014)
S. 16.004(3)(A) WIS STATS

EMAIL COMPLETED FORM TO:
DOA AGENCY IT PLANS MAILBOX
DOAAgencyITPlans@Wisconsin.gov

High-Profile Information Technology Project Status Report

Department:	Department of Corrections
Project Name:	Electronic Medical Record
Business Sponsor:	Cathy Jess

Date of Report: 10/26/2017	Reporting for Quarter: 9/30/2017
Project Start Date: 12/5/16	Planned Implementation Date: 12/11/17
Estimated Project Cost: $13.7m	Amount Provided Through Master Lease: tbd

Project Description – *Enter a brief description of the project, including the business case for it and its major deliverables.*

Objectives: Streamline patient health information/access across DOC's health system to improve patient outcomes, increase productivity, offset costs, increase practitioner communication and collaboration. Decrease duplication of services, promote immediate (real-time) access to necessary information for the team, ensure safe keeping of information, and assist with decreasing error potential in healthcare delivery. Maintain care from location to location.

To achieve these objectives, DOC will implement an Electronic Medical Record (EMR) from Cerner Corp. and Dentrix from Henry Schein. Specific solution areas include core/foundations, workflow for nursing, provider, dental, mental health, registration, scheduling, him/charting, laboratory, meds process, pharmacy, supply chain, and reporting. Also includes data warehouse & regulatory, interfaces, testing coordination, roll-out, training, and related infrastructure.

Cerner has been engaged to implement Cerner Millennium model experience for the first 5 sites and provide ongoing support committing to 99.9% availability. Remaining sites will be rolled out via a separate project that DOC will lead.

Project Funding – *Please describe all sources of funding for the project, which should add up to the estimated project cost cited above.*

Estimate covers project costs over 3 fiscal years (fy16-18). Funding sources: GPR funding of $9.7m including EOFY Reallocation, Biennial Budget realization, and 167 EMR Reserve of $4m. Also includes SCAAP Grants of $1.2m. Also, as a contingency, we have received approval to master lease part of the project, although, not planned at this time.

Project Status – Determine the status for the Schedule and Budget categories below based on the guidelines on the right and described in more detail on page 2 of this document. Insert an X in the column that best describes the status of the category. Add comments for that category as needed. Additional comments are not required if the status is Green, but if a category has a status of Yellow or Red, describe the issues or problems and what actions the agency is taking to address them.	**STATUS COLOR INDICATORS**	
	Green	On target as planned
	Yellow	Encountering **issues** (e.g., Schedule or Budget over by 10% to 25%)
	Red	Encountering **problems** (e.g., Schedule or Budget over by 25% or more)

Project Status Categories	Green	Yellow	Red
Schedule Status Overall the project continues to progress per established timeline, although 80 of 2,500 tasks are falling behind schedule in 6 areas. These include requisition routing, printer testing, Cerner Direct, project management, clinical interfaces, and lab conversion. Upcoming events include completion of system, integration, device testing and issue resolution, continuation of infrastructure roll-out, and completion go-live preparation activities such as end user id setup, pharmacy conversion, training, support, and clinical cutover. Dec. 11 go-live event approved for the pilot group. ---Note: firm 12 month project	☐	☒	☐
Budget Status	☒	☐	☐

On track. A total cost of ownership analysis and funding plan was completed to fund the project and ongoing support. Project implementation funds set aside at the outset included 11.6m over fiscal years 2016 - 2018. Estimated costs rose by 2.1m since the last report to fund decision points approved by the EMR Executive team and allocate equipment costs. The total estimate has been increased from 11.6m to 13.7m to match funding levels and include additional costs. -- Note: fixed cost project with Cerner

This document can be made available in alternate formats to individuals with disabilities upon request.

Summarize Any Completed Major Tasks or Project Phases:

Major tasks or activities completed this period included: two build checkpoints, integration testing 1 (IT 1), IT 1.5 to address remaining functionality. IT2 was completed early October. Also completed formulary scanning event, adoption sustainment workshop, and clinical cutover workshop. Continued to address data integration testing and changes to exchange data between DOC and vendor systems. Began design of a pharmacy conversion process to simplify moving prescription data from an existing system (QS/1) to Cerner Millennium.

Completion status:
workflows approved - 99%, in process - 1%;
data collection workbooks (DCW) - 99%, design decision matrix (DDM) - 100%, build status - 99%;
unit testing - 99%, system testing - 99%, integration testing 94%

Summarize Any Significant Project Changes Affecting Schedule, Budget or Scope:

For each change, describe what the change involved, when it was approved, and the reasons behind the approved change.
DOC has established a governance model to manage the project, including key decisions impacting the project scope, timeline, or estimated cost. Several decisions have been made to date and have been included in the project. Examples of significant decisions thus far: First 5 pilot sites were selected and include: DCI/JBCC, TCI, REECC, LHS/CLS, and WCI. Additional sites include central pharmacy and central office. Refer to DOC's internet page for acronym definitions as needed. Wi-Fi approved for med pass in restricted housing and infirmary locations.

Additional approvals included: Inquiry access for non-pilot sites, flexible printing solution, additional resources for pharmacy conversion, bar code scanners, and reprinting of inmate badges.

WCI will be implemented in phases. Dentrix and Dragon dictation will be implemented during the pilot. The remaining EMR functionality will be deployed during one of the later implementation waves.

Additional Comments or Issues *(optional)*:

If you have any additional overall status comments about the project (e.g., project news, accomplishments, emerging challenges or risks that could affect the project), please provide them here.
Value measures for the project were defined and include:
1) Improve safety through: drug reaction checking, monitoring for medication non-compliance, mitigation of health care services risks, improvement in continuity use of best practices, decrease of adverse drug reactions, decrease the risk of HIPAA violation, real time updates of medication order changes, reduce number of medication delivery errors
2) Offset EMR costs by reducing: duplicate orders, paper forms and documentation filing costs, transcription costs, pharmacist costs, drug wastage, emergency room and inpatient hospital visits
3) Improve quality via: reducing time spent manually printing paper MARs, improving provider effectiveness, automating immunization registry reporting, decreasing the amount of physical label manipulations, decreasing cycle time for drug orders to delivery, data collection and CQI, increasing accountability, reducing offender complaints, maintaining care from one location to the next, more efficient appointment scheduling, improving accessibility of medical documentation, reducing wait times, providing more accurate and sustainable care to those in our charge.

Project Status Category Guidelines

Schedule Status
Green – Indicates that the project or phase is on track for the targeted implementation date.
Yellow – Indicates that the project or phase may be falling behind and analysis needs to be done to determine if

Project Status Category Guidelines
the project can recover and still achieve the targeted implementation date, or if adjustments must be made to that date. **Red** – Indicates that the project or critical tasks <u>have fallen behind</u> schedule, and corrective action must be taken to still achieve the targeted implementation date or that date must be changed.
Budget Status **Green** – Currently on target with project budget. **Yellow** – Project is over budget by 10 to 25%. **Red** – Project is over budget by 25% or more.